VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

PAGE 02

File with: lowa Ethica and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

MORITZ FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

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Effective May 1, 2010, all st	tatements and reports for State PACs a	nd State	2011 100
Parties must be filed electron	onically. Reset Fo	-	2011 JAN 19 AM 11:
COMMITTEE NAME (Must be same as on Statement of			Scutt
Committee To Elect Monitz			FORM
IMPORTANT: Indicate by # type of committee you are reporting (1) Statewide/Legistative/Judga Standing for Retention Cambridat (4) County Central Committee (5) County Candidate (6) City C Subdivision Candidate (8) County PAC (9) City PAC (10) Sch 11) Local Ballot Issue	9 (2)State PAC (3)State Party	(R	DR-2 DISCLOSURE REPORT COffice Use Only
CANDIDATE COMMITTEES ONLY:			gged in SQ
Candidate Name Roxenna Moritz	Political Party (if applicable) Democrat	Sc	anned SU
Office Spught Auditor	District (if Senate or House)		mputer
Late reports are subject to possible civil and criminal penalties. candidate's committee, and the chaliperson, for any other type SIGNATURE OF PERSON FILING REPORT	Pursuant to lowa Code sections 688.326 of committee, is the individual responsible 563324-4752 TELEPHONE	e for filing tir	.401(3), the candidate, for a nely and accurate reports. DATE SIGNED
AM FILING A January 19th	REPORT FOR (1) ELECTION	// PINON E	I COMON VEAR
(edate)	indicate by		ELECTION TEAR.
CHECK IF AMENDMENT TO REPORT DATED	•		
			nittees, enter Date of Election
Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is formally a present the continue to file reports until a present the continue to file	e of Dissolution Form DR-3.		er 6, 2012 cal Committees, enter County in on is held
STATEMENT OF CASH ON HA	IND		
CASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as to of the last reporting period or must be zero if this	he cash on hand at the end	\$	3.36
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule F: Loans Received total (Attach Sched	•		75.00
Schedule H: Total Sales of Campaign Property (·		
(Schedule Happlies to Candidates' Co			
	SUB-TOTAL	S	78.36
SUBTRACT TOTAL MONEY SPENT THIS PERI			
Schedule B: Expenditures total (Attach Schedule			64.20
Schedule F: Loan Repayments total (Attach Sche	•		
CASH ON HAND at the end of this reporting period (if final	·		14.16
**UNPAID BILLS (From Schedule D - Attach Schedule D).		ę	
1N KIND CONTRIBUTIONS (From Schedule E - Attach Sc		-	
COUTSTANDING LOANS (From Schedule F - Attach Sch	•	•	
CONSULTANT BREAKDOWN (Schedule G Attached?)	~	* ******	YESNO
CANDIDATE COMMITTES ONLY:		29 - 911,	_ 123174

01/19/2011 08:50 5533244752 For instructions, See Back of Form	MORITZ	Reset Form	SCHEDULE	PAGE 03
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)			(Rev. 07/03)	RECEIPTS CK THIS BOX IF
COMMITTEE NAME (Must be same as on Statement of Organization	tion)		AME	NDING FORM
Committee To Elect Moritz				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE ROARD.

NOTE: ANY PERSON, OTHER THAN AN INDMIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE [*] (if applicable)	AMOUNT RECEIVED	FOR FUND. RAISER INCOME
01/19/10	ID# CK# 22.59	Roxanna & Thomas Monitz 220 North Elmwood Avenue Davenport, IA 52802	Self & Spouse	\$ 75.00	
	ID# CK#				
	ID#				1
	CK#				<u> </u>
	ID# CK#				
	ID#				
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<u> </u>	CK#			-	
	CK#				 L
- <u></u> -	ID#				T-
	CK#				
	CK#				
	ID#				
	CK#]
			SUB-TOTAL	\$ 75.00	
		TOTAL (If last p	page of this schedule)	\$ 75.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinty (blood relatives) and affinity (relatives by marriage). If sumaime of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CAMBIDATE IDENTIFICATION HUMBER. BY THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF 10 NUMBERS IS AVAILABLE FROM THE IOWA ETHICS. & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF INDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Moritz

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID MUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
02/08/10	CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	\$ 535
03/08/10	CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
04/08/10	ID# CK#	Wells Fargo 203 West 3rd Street Davenport_IA 52801	Monthly Service Fee	5.35
05/10/10	ID# CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
06/08/10	CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
07/09/10	ID#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
08/09/10	ID# CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
09/09/10	CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
			SUB-TOTAL	\$ 42.80

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-raising, politing, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and lower Code 684,402(3)(1).)

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Page		of _ ²	

\$

TOTAL (If last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset	Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
-	CK THIS BOX IF

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COMMITTEE NAME	(N	lust be same as on S	ta	tement	of (Organization)

Committee To Elect Moritz

Committee	to exect wortes			
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/ 08/10	CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	\$ 535
11/08/10	ID#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
12/08/10	ID# CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
01/10/11	CK#	Wells Fargo 203 West 3rd Street Davenport, IA 52801	Monthly Service Fee	5.35
	ID#			4.
	CK#	-		
	ID#			·*· V*
	ID#			
•••	CK#		SUB-TOT/	\$ 24.40 -

TOTAL (if last page of this schedule)

\$ 64.20

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entitles providing consulting, advertising, fund-taising, polling, managing, organizing services must also be detail flemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(I).)

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